

City of Easthampton

Board of Assessors

| | Date Request # |
|-----------|---|
| (| (NO FAXES OR MAILED REQUEST WILL BE HONORED WITHOUT PRIOR APPROVAL) |
| ROPERTY L | OCATION: |
| | Applicant Name: |
| | Mailing Address: |
| | |
| | Purpose of Request: |
| | Requested By: Planning/Zoning Licensing Conservation Other: |
| | Applicant Signature: |
| | Contact Information: Phone # : E-mail: |
| | Board of Assessors Use Only |
| | Certified By |